

**Texas Department of Health
Commissioner's Report to the Board of Health
September 21, 2001**

Lab Building. Brickwork is complete. Wall framing is complete through five floors, and 80% complete on sixth floor. Sheetrock tape and float is complete for the first two floors and is ready for paint. Telephone/data cabling is complete through four floors. Exterior overhead and sliding doors are scheduled for delivery on September 6, and installed 30 days later. Then, the building can be secured. HVAC will be running 24 hours a day to cure interior finishes. *For more information contact Tim Horn, Lab Office/Building Project, (512) 458-7780 or e-mail tim.horn@tdh.state.tx.us.*

Campus Security. The Bureau of Resource Management (BRM) is proceeding with the security proposal approved by upper management. Twenty-four hour, seven days a week security guards have been put in place. The primary security system contract has been awarded and the contractor is proceeding with the installation of cameras inside and outside of the building on the main campus, a swipe card/employee identification system that will assist in establishing a more controlled access environment, and a security system for the new lab building. BRM is also proceeding with reconfiguring the security guard station at the main entrance to contain a monitoring station to monitor cameras on campus. The new security guard station and the security camera system should be operational by mid September. Issuance of ID/swipe cards will begin in October 2001. *For more information contact John Burlinson, Resource Management, (512) 458-7738 or e-mail john.burlinson@tdh.state.tx.us.*

Consolidated Applicant Intake Center. The center has an official name, "HHS Job Center". The office was up and running on September 4. The official opening date was September 10. Grand opening ceremonies are anticipated to take place on October 12 or 13. *For more information contact Sharon Brewer, Human Resources, (512) 458-7111, ext. 6138 or email sharon.brewer@tdh.state.tx.us.*

Survey of Organizational Excellence. The School of Social Work at the University of Texas at Austin will be conducting the 2001-2002 iteration of the Survey of Organizational Excellence (SOE). Several TDH staff met on September 5 to discuss roll out of the SOE survey. They will work with the Communications Office on a marketing plan to assure agency wide participation in the survey. We anticipate the survey will be distributed in late November. *For more information contact Sharon Brewer, Human Resources, (512) 458-7111, ext. 6138 or e-mail sharon.brewer@tdh.state.tx.us.*

West Nile Virus Surveillance. West Nile virus (WNV) was found in a blue jay on the east side of the Mississippi River in New Orleans, Louisiana. The virus will eventually come to Texas is a certainty, if it is not already here. The Texas WNV surveillance program activities include mosquito collection and testing, equine sentinel surveillance, dead bird surveillance, captive zoo bird surveillance, and sentinel chicken flocks. The TDH is also testing all human encephalitis cases for WNV and St. Louis encephalitis. To date, all specimens that have been tested have been negative. *For more information contact Jim Schuermann, Zoonosis Control Division, (512) 458-7255 or e-mail jim.schuermann@tdh.state.tx.us.*

Primary Amebic Meningoencephalitis (PAM). Three cases of primary amebic meningoencephalitis have been reported to TDH since August 1. The patients are an 8 year-

old male, 9 year-old male, and a 9 year-old female. All have a history of water exposure in the week prior to death. The water exposures were all in large (greater than 10 square miles) bodies of fresh water that were of varying depth. The specific areas of the lakes where the exposures may have occurred have not been identified. All cases have laboratory confirmation of *Naegleria fowleri* (*N. fowleri*) from cerebrospinal fluid (CSF).

Thirty-two cases of amebic meningitis have been reported in Texas since the first report in 1972. *N. fowleri* was identified from the CSF or brain tissue in 27 of the cases. According to the laboratory reports, three cases were caused by *Balmuthia* species, one was due to a leptomyxid ameba, and one was caused by an unidentified ameba. Twenty-two of the 32 cases occurred during July and August. *For more information, contact Neil Pascoe, Nurse Epidemiologist, Infectious Disease Epidemiology & Surveillance Division, (512) 458-7676 or email neil.pascoe@tdh.state.tx.us.*

Cryptosporidiosis. On August 14, a north central Texas county health department reported an increase of diarrheal illness among lifeguards with one lab confirmed case of cryptosporidiosis. IDEAS assistance was requested to help determine the scope of the situation. Twenty-six lifeguards were interviewed, 9 met the case definition. Data analysis of reported cryptosporidiosis cases indicate no other community-based illness. Interviews revealed that ill lifeguards had frequent interaction, including sharing food and drinks with each other. Although data suggested association between risk of diarrheal illness and a specific pool, the data were inconclusive. An inspection was ordered for the pool in question. *For more information contact Linda Gaul, Staff Epidemiologist, Infectious Disease Epidemiology & Surveillance Division, (512) 458-7676 or email linda.gaul@tdh.state.tx.us.*

Botulism. On August 30, 6 north Texans (2 children, 4 adults) were reported hospitalized with classic symptoms of botulism. All individuals had attended a church supper consisting of chicken and chilidogs. An investigative team from TDH, CDC, USFDA, and Regional staff are actively working on this situation. *For more information contact Linda Gaul, Staff Epidemiologist, Infectious Disease Epidemiology & Surveillance Division, (512) 458-7676 or email linda.gaul@tdh.state.tx.us.*

On or about the week of August 27, a food borne outbreak of botulism was reported to TDH. At least six persons with confirmed botulism were hospitalized in critical condition as a result. Coordinating with TDH's epidemiology and laboratory staffs, our Manufactured Food Division staff conducted an investigation of this food borne outbreak and it was found that the salvage establishment had reconditioned, sold, and distributed to the consumer two-chili products. An inspection of the establishment was conducted on September 1. The inspection revealed serious violations including unreconditioned merchandise that was adulterated, salvaged merchandise that was mislabeled, and salvaged merchandise that was not held at appropriate temperatures. On September 4, TDH issued an emergency order prohibiting the salvage establishment from operating. *For more information contact Derek Jakovich, Director BFDS Licensing and Enforcement, (512) 719-0246, ext. 407 or e-mail Susan.Tennyson@tdh.state.tx.us.*

Hepatitis C The hepatitis C radio and TV advertisements, in English and Spanish, completed their runs in Regions 8 and 11. Pre- and post-surveys were conducted to assess the public's awareness and knowledge of hepatitis C. The Region 8 analysis shows an increase in awareness of hepatitis C, rising from 23% to 75% of those surveyed. Almost 70% of the respondents were able to recall specific content from the advertisements, such as the ways

the virus is transmitted, the importance of getting tested. There was a significant increase in the percentage of respondents, from 81% to 96%, who said sharing needles is likely to transmit hepatitis C. The intent to get tested for the virus has also increased from 88% to 96% of the respondents. The Region 11 analysis has not yet been completed.

New TV and radio advertisements, targeting young African-American males, ages 14-19 have been produced. The advertisements were developed with the advice of the National Association for the Advancement of Color People Houston Branch, and their adolescent program participants, ages 12-19. They assisted in the design of the message. A corresponding poster has been developed as well. Both the ads and the posters feature the new TDH slogan/logo "Don't Get Stuck With Hepatitis C." TDH has applied to both the U.S. Trademark and Patent Office and the Texas Secretary of State's Office for a registered trademark on the new slogan/logo. These posters are already in use in Travis County and will be distributed throughout the state.

The seroprevalence studies indicated, approximately 70% of injection drug users, about 12% of the HIV/STD clinic clientele, and 2% of the general population across the State of Texas are Hepatitis C Virus positive. In July, testing for co-infections (hepatitis B and syphilis) began on the specimens collected for these studies. The dynamics of the hepatitis C epidemic are intertwined with these other infections through common risk behaviors. This study will help in our understanding of them. In August, a study was initiated to examine the distribution of the HCV genotypes in those using the statewide hepatitis C counseling and testing sites. Since genotype influences morbidity and treatment outcome, genotype information will assist in developing a statewide plan for the allocation of resources to address this epidemic. Also, knowledge of the existing genotypes and their distribution across the populations and ethnicities in Texas will allow targeted prevention education. The detection of genotypes found more commonly outside of the United States will further our knowledge of HCV transmission dynamics. *For more information contact Gary Heseltine, Staff Epidemiologist, Infectious Disease Epidemiology & Surveillance Division, (512) 458-7676 or email gary.heseltine@tdh.state.tx.us.*

Grant Award for TB Research. On August 20, the TB Elimination Division received notification that the Centers for Disease Control and Prevention has awarded TDH a 10-year contract to create a Tuberculosis Epidemiologic Studies Consortium. The Consortium includes members from the TDH, Houston Health and Human Services, Texas Department of Criminal Justice, and various universities. The Consortium will assist the Centers for Disease Control in developing future epidemiologic studies involving tuberculosis. A second grant was awarded to another group of TB researchers in Texas headed by Dr. Stephen Weis of the University of North Texas. *For more information contact Jeff Taylor, or Charles Wallace, TB Elimination Division, (512) 458-7447 or e-mail jeff.taylor@tdh.state.tx.us or charles.wallace@tdh.state.tx.us.*

Drug Donation. In late June VersaPharm Inc., the company that supplies TB medicine for TDH offered more than 3,000 bottles (containing either 100, 90 or 60 tablets) of short dated Ethambutol for donation. Working together with Border Health, the TB Elimination Division contacted the four Mexican border states (Tamaulipas, Nuevo Leon, Coahuila and Chihuahua) as well as our binational TB programs (Grupo Sin Fronteras, Los Dos Laredos and JUNTOS). With their help these medicines were transported through the border to Reynosa, Tamaulipas and Ciudad Acuña, Coahuila and will be used by the public health

sector of the four states before the expiration dates, which are December 2001 and January 2002. *For more information contact Jose Moreira, TB Elimination Division, (512) 458-7447 or e-mail jose.moreira@tdh.state.tx.us.*

Outreach Worker Survey. A survey was mailed out the week of August 13 to TB outreach workers at all the regional and local health department TB programs. The purpose of the survey was to assess the level of knowledge and to determine the training needs of the outreach workers. Information gathered through this survey will be used to design a training program that teaches the knowledge and skills necessary for fully successful outreach workers. *For more information contact Emmanuel Iroanya, TB Elimination Division, (512) 458-7447 or e-mail wmmmanuel.iroanya@tdh.state.tx.us.*

US-Mexico Border Health Commission. Staff members of the TB Elimination Division presented information on TB to the US-Mexico Border Health Commission at their August 3 meeting in Austin. *For more information contact Charles Wallace, Ph.D., MPH, TB Elimination Division, (512) 458-7447 or email charles.wallace@tdh.state.tx.us.*

Funding Formula. Members of the TB Elimination Division presented information about the tuberculosis funding formula to participants at a Texas Association of Local Health Officials meeting on August 9. *For more information contact Charles Wallace, TB Elimination Division, (512) 458-7447 or email charles.wallace@tdh.state.tx.us.*

US Mexico Border Summit. A representative of the TB Elimination Division attended the US. Mexico Border Summit held in Edinburg on August 22-24. The summit addressed issues of business, NAFTA, the environment, housing, legislation, energy, marketing, health and philanthropy. *For more information contact Charles Wallace, TB Elimination Division, (512) 458-7447 or email charles.wallace@tdh.state.tx.us.*

Correctional Health Care. The Centers for Disease Control and Prevention Region VI sponsored a conference August 22-24 in Dallas on "Linking Correctional Health with Community Health, Partners in Prevention and Care of Infectious Disease." The TB Elimination Division Director gave a presentation on tuberculosis as part of the conference. *For more information contact Charles Wallace, TB Elimination Division, (512) 458-7447 or email charles.wallace@tdh.state.tx.us.*

New Guidelines on Treatment of Latent TB Infection. On August 31, the Centers for Disease Control and Prevention released an article on severe and fatal liver injury connected to latent TB treatment with rifampin and pyrazinamide. The article discusses 21 instances of severe liver injury including 5 deaths. Two of the cases of liver injury occurred in Texas. New guidelines for use and monitoring of the treatment of latent TB infection were also issued. *For more information contact Charles Wallace, TB Elimination Division, (512) 458-7447 or email charles.wallace@tdh.state.tx.us.*

TB and DNA. On September 14, the TB Elimination Division host a meeting in Austin on the application of studies of DNA from TB isolates to public health. Researchers and TB program managers will attend. *For more information contact Charles Wallace, TB Elimination Division, (512) 458-7447 or email charles.wallace@tdh.state.tx.us.*

El Paso County Heavy Metals Survey. In response to recent concerns over the possibility that soil in the El Paso area might still contain excess lead and arsenic, the Texas Department of

Health Environmental Epidemiology and Toxicology Division recently completed three public health consultations. These consultations were prepared at the request of the US Environmental Protection Agency (EPA) and local health. The first consultation reviewed historical soil sample results collected by the Texas Air Control Board in 1989 and by four University of Texas at El Paso (UTEP) Graduate students in 1993 and 1994. Based on these data, TDH found sufficient cause to recommend that EPA conduct confirmation sampling in potentially high exposure areas such as schools and parks. The second consultation reviewed data from the confirmation-sampling event and recommended more extensive sampling at several schools, parks and UTEP. The third consultation reviewed the extensive sampling from UTEP and concluded that the levels of lead and arsenic found in the areas sampled do not pose a public health hazard either to faculty, staff, or students. Additional public health consultations are planned for residential areas, parks and schools. *For more information contact John F. Villanacci, Environmental Epidemiology and Toxicology Division, (512) 458-7269 or email john.villanacci@tdh.state.tx.us.*

Hepatitis C Virus (HCV) training. A trainer from the HIV/STD Health Resources Division traveled to Denver, Colorado, to provide the one-day Hepatitis C Virus (HCV) training. There were 16 participants from the Colorado Department of Health and numerous community based organization representatives attending. TDH developed the HCV course in October of 2000, in response to legislation. A number of other states have requested copies of the training materials to use within their own programs. The training materials can also be found on the Bureau of HIV and STD Prevention website. *For more information contact Sharon King, HIV/STD Epidemiologic Monitoring Branch, (512) 490-2560 or e-mail Sharon.King@tdh.state.tx.us.*

HIV Infection Testing Survey (HITS). The HITS survey, conducted in Houston and Austin in 1995, 1996, 1997, 1998, and 2000, involves interviewing persons in gay bars, at drug street sites, and at STD clinics; it has a dual focus: (1) measuring the impact (if any) of HIV reporting by name on Texas residents' attitudes and willingness to be tested for HIV; and (2) garnering behavioral surveillance data. Texas is also one of two areas to pilot test doing HITS interviews via Computer Assisted Interviewing (CASI). The total number of HITS 2000 interviews was 448. Of these, 15 were incomplete and discarded (11 face-to-face interviews and 4 CASI interviews), leaving 433 complete usable interviews. One of the most interesting preliminary findings of HITS 2000 in Texas relates to an apparent resurgence of risky behavior among men who have sex with men (MSM). Taken together with recent upsurges in MSM syphilis in Houston and San Antonio, HITS provides an early warning system for those working in HIV prevention.

Comparing 1998 to 2000 responses, the following indications of increasing risk among Texas MSM were identified: In 1998, 28 percent of MSM agreed with the statement, "You are less concerned about getting HIV than you were 5 years ago because there are better treatments now." In 2000, 42 percent of the MSM interviewed agreed with this statement. In 1998, 13 percent of the MSM interviewed agreed with the statement, "You are less careful about being safe with sex or drugs than you were 5 years ago because there are better treatments for HIV now." In 2000, 23 percent of the MSM interviewed agreed with this statement. In 1998, 21 percent of the MSM interviewed for HITS disagreed with the statement, "Your friends think getting tested for HIV is important." while in 2000, 27 percent of the MSM disagreed with this statement. Increases in MSM "Yes" responses to the question, "Have you ever been told you had an STD?" (29 percent in 1998; 39 percent in

2000). Increases in MSM “Yes” responses to the question, “Have you ever used street drugs?” (45 percent in 1998; 73 percent in 2000). Increases in MSM “Yes” responses to the question, “Have you ever injected drugs?” (15 percent in 1998; 26 percent in 2000). Increases in MSM *self-perceived chances of getting HIV in the future* (in 1998, 6 percent responded “6” or higher on a 1-10 scale, with 10 the highest; in 2000, 19 percent responded “6” or higher). *For more information contact Sharon King, HIV/STD Epidemiologic Monitoring Branch, (512) 490-2560 or e-mail Sharon.King@tdh.state.tx.us.*

Centers for Disease Control and Prevention Trainer for STD Supervisor Courses. A trainer from the HIV/STD Health Resources Division has been named as a national back-up trainer for the Centers for Disease Control and Prevention (CDC) STD supervisor courses. There were several trainers from around the nation who were considered. The back-up trainer will be responsible for conducting two courses per year, at the CDC’s request. *For more information contact Casey S. Blass, Director, HIV/STD Health Resources Division, (512) 490-2515 or e-mail Casey.Blass@tdh.state.tx.us.*

Texas HIV Medication Program (THMP) Vendor Drug Contract. Cardinal Health recently purchased Bindley Western, the THMP contractor responsible for distribution of medications to pharmacies statewide. In early June, Cardinal Health assumed distribution of HIV medications to pharmacies across the State. In July, the Bureau Chief, and HIV/STD Clinical Resources Division (CRD) administration and program staff, with the assistance of TDH Purchasing and the General Services Commission, managed and largely corrected serious problems experienced by pharmacies, including disruption of delivery services. During August, the number and scope of problems with the delivery system have improved significantly with only minor breaks; CRD and program staff continues to monitor problems and take immediate corrective action. Cardinal management has been notified of a small but escalating number of errors in accuracy of drug packaging, and a response was received which is felt to be adequate at this point; THMP staff monitoring the adequacy of the contractor’s system changes to increase accuracy will continue. The THMP has implemented a “sentinel event” e-mail system to immediately notify Cardinal of problems with service delivery and simultaneously track the response to ensure correction.

Accounting functions with Cardinal have improved. A second on-site meeting has occurred between Bureau staff and Cardinal to reconcile the accounting systems between the THMP and Cardinal. Bureau accounting staff, in coordination with CRD, worked with Cardinal to meet all TDH deadlines for entering payment vouchers prior to the August cut-off date so that payment could be made and penalties for late payment to Cardinal by TDH would be avoided. *For more information contact Linda S. Moore, Director, HIV/STD Clinical Resources Division, (512) 490-2505 or e-mail linda.moore@tdh.state.tx.us.*

Workflow Meetings. The Newborn Screening laboratory conducted workflow meetings and began the process of installation, training, and validation, during July, for the upgraded Perkin Elmer laboratory technology methods and equipment. On August 23 the laboratory began processing newborn specimens using the upgraded technology. *For more information contact Eldridge T. Hutcheson, Director, Biochemistry and Genetics Division, (512) 458-7430 or e-mail eldridge.hutcheson@tdh.state.tx.us.*

Pertussis Activity. Increased pertussis activity has occurred in PHR 11. Last year there were 24 confirmed or probable cases in PHR 11 (6 confirmed by culture and 5 by epi link), and so

far this year there are 37 confirmed or probable cases (22 confirmed by culture and 15 by epi link) with 24 possible cases under investigation. The increase has occurred primarily in Cameron County (14 year to date in 2001 compared to 7 in 2000) and Hidalgo County (10 and 5, respectively). A group of 17 infants was exposed to one of the probable cases. Although the contact was minimal, families of the infants have been notified. A letter will be sent to area physicians alerting them to the increased pertussis activity. *For more Information contact Laura Tabony, Immunization Division, Surveillance and Epidemiology Program, (512) 458-7284, or e-mail laura.tabony@tdh.state.tx.us.*

Increasing immunization compliance and registry of preschool and school age children

The ImmTrac Program has been working closely with the Dallas Independent School District on their innovation grant from TDH. The project is to demonstrate the effectiveness of a collaborative process involving school nurses, school-based clinic nurse practitioners, and state, county, and city health department personnel. The project will focus on increasing immunization compliance and registry of preschool and school age children through educational outreach to parents by school nurses, Home Instruction Program for Preschool Youngsters (HIPPPY) home instructors, and school-based clinic practitioners. The registry will be available to all Dallas ISD school nurses in the 235 schools and 9 school based health centers. *For more Information contact Patricia Feagin, ImmTrac Program, (512) 458-7284, or e-mail pat.fregin@tdh.state.tx.us.*

ImmTrac. A new version of ImmTrac was released on July 16, 2001. Version 6.10 included new vaccine codes, expanded client lookup features, displays of potential client matches, security enhancements, and increased performance response for users. Minor changes were also made to some of the behind the scenes operations. *For more Information contact Patricia Feagin, ImmTrac Program, (512) 458-7284, or e-mail pat.fregin@tdh.state.tx.us.*

Drugs and Medical Devices Division Enforcement Activities. The Drugs and Medical Devices Division of the Bureau of Food and Drug Safety (BFDS) Licensing and Enforcement held ten enforcement conferences during the month of August. The TDH recently entered into Agreed Orders with five tanning facilities and recovered \$2,720 in investigative and administrative costs and \$1,500 in administrative penalties, plus probation. Violations included detained devices removed from premises, failure to obtain a license, failure to ensure that no consumer was allowed to use a tanning device more than once in a 24 hour period and failure to locate protective eyewear in the immediate proximity of the devices. Two Default Orders were also issued to two tanning facilities for \$12,500 in assessed administrative penalties. *For more information contact Derek Jakovich, Director BFDS Licensing and Enforcement, (512) 719-0246, ext. 407 or e-mail Derek.Jakovich@tdh.state.tx.us.*

Meat Safety Assurance (MSA) Slaughter Plant. An MSA inspector assigned to a slaughter plant observed the plant accept 9 dead calves, reportedly from suffocation, for processing. The owner of the calves was advised that the plant could not process animals that died in a manner other than by slaughter and that the meat was not eligible for use as human food. The owner elected to take the carcasses home to a "deer cooler" on his property. MSA compliance officers followed up by reviewing several likely locations, primarily local fast food establishments, where the owner may try to sell the meat. The owner agreed to sign a statement indicating that he will not try to sell meat from the carcasses for use in human food. *For more information contact Lee Jan, D.V.M., Director, Meat Safety Assurance Division, (512) 719-0205 or e-mail Lee.Jan@tdh.state.tx.us.*

Milk and Dairy Products Division Enforcement Activities. In August, 565,470 pounds of milk produced under unsanitary conditions or failing to meet quality and safety standards were removed from food channels. One hundred eleven thousand eight hundred (110,800) pounds of this removal from food channels was because of aflatoxin contamination of dairy rations resulting in contamination of the milk in excess of 0.5 parts per billion. Thirty-six Grade A Permits were suspended as a result of violations of milk product quality and safety standards or for violation of sanitation rules for facilities or operations. *For more information contact J. Wendell Littlefield, Director, Milk and Dairy Products Division, (512) 719-0260 or e-mail Wendell.Littlefield@tdh.state.tx.us.*

U.S. Nuclear Regulatory Commission Review of Radioactive Materials Program. A seven-member Integrated Material Performance Evaluation Program (IMPEP) team, consisting of staff from the U.S. Nuclear Regulatory Commission (NRC) and other state radiation control programs, conducted an in-depth review of the regulatory programs in both the TDH and the Texas Natural Resource Conservation Commission for radioactive materials. The state's regulatory program authority for certain radioactive materials is through an agreement between the governor of the state and the NRC. The State of Texas' program was found to be adequate to protect public health and safety and compatible with NRC's program. The TDH Bureau of Radiation Control was found to be satisfactory, the top rating given by the IMPEP team in all categories evaluated, which included: staffing and training, material inspection frequency and quality, technical quality of licensing, legislation and regulations, sealed source and device reviews, and uranium licensing and inspections. Several good practices unique to the Texas program were noted, and several recommendations for improvements were made in some of the areas evaluated. The IMPEP audit of the materials program is performed every four years. *For more information contact Richard Ratliff, Chief, Bureau of Radiation Control, (512) 834-6679 or e-mail Richard.Ratliff@tdh.state.tx.us.*

Governor's EMS and Trauma Advisory Council (GETAC). GETAC, its 6 Standing Committees, and 6 Task Forces/Workgroups met last month in Austin over 3 days; stakeholders continue to participate in high numbers. The Council members began the EMS/Trauma System Strategic Planning Progress required by EMS legislation passed during the recent session (HB-2446). GETAC will meet during the Texas EMS Conference in Austin on November 18-19. During those meetings, the Standing Committees (EMS, Education, Medical Directors, Pediatrics, Trauma Systems, and Injury Prevention) will hold public hearings relating to the strategic plan. Additionally, surveys have been drafted that will be sent to all EMS medical directors, first responder organizations, EMS providers, and hospitals to obtain base line information for the strategic plan. *For more information contact Kathryn C. Perkins, Chief, Bureau of Emergency Management, (512) 834-6700 or e-mail kathy.perkins@tdh.state.tx.us.*

Bandera County EMS Assessment. At the request of the Bandera County Judge and Commissioner's Court, a Team comprised of Bureau of Emergency Management EMS staff from the Central Office, and Public Health Regions 4/5N, 7, and 8 conducted an Assessment of Bandera County's EMS capabilities. This process included team members' pre-visit review of statistical, geographic, and demographic information, a four-day on-site visit, and a comprehensive written report that included four possible options for EMS operations and recommendations for the enhancement of EMS services in the county. The report was presented to the Judge and Commissioners in an open meeting. At least two media outlets addressed the assessment and report in subsequent news stories. *For more*

information contact Jim Arnold, Assistant Chief for EMS, Bureau of Emergency Management, (512) 834-6700 or e-mail jim.Arnold@tdh.state.tx.us.

Assistance provided during Houston floods. During the past flooding in Houston there was a great increase in need for persons to address the water damage in buildings affected by the flooding. Toxic Substances Control Division, Indoor Air Program spent many hours on the phone advising customers how to remediate the water damage and how to avoid or remediate mold growth in their buildings. In addition to the requirement to quickly address the water-damaged buildings to avoid the growth of mold, the asbestos that would be disturbed by these remediation activities needed to be addressed. The Asbestos Programs Branch addressed the licensing requirement by creating an avenue to expedite the issuance of asbestos worker registrations and licenses for asbestos professionals. There were 11 Provisional License's issued to Asbestos Supervisors and 75 Worker license's issued related to the Houston flood. The result of these efforts was that customers were able to address their health problems in their buildings both legally and with greater confidence of remediating those problems correctly. For more information contact Todd Wingler, Toxic Substances Control Division, (512) 834-6610, or e-mail Todd.Wingler@tdh.state.tx.us.

Discontinuing Reimbursement of Renagel in the TDH Kidney Health Care Program. The Bureau of Kidney Health Care (KHC) recently announced that it would discontinue reimbursement of the drug Renagel, a phosphate binder, effective October 1. Renagel is indicated for the reduction of serum phosphorous levels in dialysis patients with end-stage renal disease. The decision to remove Renagel was based on the significant increase in the use of the drug and subsequent increase in KHC expenditures for Renagel. In fiscal year 2000, KHC expended approximately \$1.1 million for Renagel for 1,727 recipients. In fiscal year 2001 the cost for Renagel was \$2.6 million for 3,074 recipients (as of July 20, 2001). The conservative cost projections for Fiscal Years 2002 and 2003 are \$7.4 million for about 6,000 recipients and more than \$14.1 million for about 10,000 recipients, respectively. To continue covering Renagel would have a significant negative effect on the program's ability to provide the other vital medications used in the treatment of patients with end-stage renal disease. There are other drugs on the formulary that are available to control phosphate levels. The range of cost of the other phosphate controlling medications is as low as .01¢ to .10¢ per unit cost. A 400-mg capsule of Renagel is approximately .50¢ per capsule and an 800-mg capsule is approximately \$1.00 per capsule.

Imposing a drug limitation on Renagel was considered. Although the manufacturer's recommended dosage is 3 or 4 capsules per meal, the average prescription given to patients in Texas is 6 or 7 capsules per meal. Imposing a drug limitation which allows reimbursement for only 3 or 4 capsules per meal as recommended by the manufacturer would have saved KHC \$600,000 in FY 2001. The program would still have spent \$2.0 million in FY 2001 (as of July 20, 2001) and would expect to spend nearly \$5.6 million for Renagel in FY 2002, with the limit imposed. This supports the fact that even a limit on what is reimbursed for Renagel would also have a significant negative impact on the program.

Since the announcement, we have received over 35 phone calls and numerous e-mails regarding this issue. Of these, two were from legislators. We have also received one call from a reporter with the Dallas Morning News, which subsequently published an article regarding the removal of Renagel from the KHC formulary. Most of the calls are from

nephrologists and renal dieticians who wanted to express their strong support for keeping Renagel on the KHC drug formulary. *For more information contact Phil Walker, Chief, Bureau of Kidney Health Care, (512) 685-3100 or e-mail phil.walker@tdh.state.tx.us.*

Public Health Region 2/3

Botulism outbreak. TDH Region 2/3 staff participated in the investigation of an outbreak of foodborne botulism that occurred in late August and early September in the DFW area. The outbreak investigation included assisting the treating physicians with anti-toxin deliveries, conducting a foodborne outbreak investigation to determine the likely contaminated foods, testing suspect foods and patient specimens for botulinum toxin and *Clostridium botulinum* bacteria, assisting the United States Department of Agriculture (USDA) with the food product trace back and recall activities, and working with the news media and the public. Multiple Region 2/3 staff was involved in the investigation, including the Regional Director and DRD, epidemiology staff, Environmental and Consumer Health sanitarians, and others. As of September 4, there were 8 hospitalized botulism patients, and several others who are only mildly affected. *For more information contact Brad Walsh, TDH PHR 2&3, (817) 264-4551, or e-mail brad.walsh@tdh.state.tx.us.*

Rabies. Rabies infected animals are on the decline at this time. During August there were 17 rabies-infected skunks, one dog, one fox and one cat with the skunk strain of rabies. Tarrant County currently has 81 rabies infected animal cases. The PHR 2/3 has 351 positive cases as of September 4th. Last year (2000) the total numbers of cases were 381 for PHR 2/3.

Zoonosis control had six media (radio and newspaper) contacts during August concerning rabies infection of animals in PHR 2/3 and the quarantining of the captured wild bobcat at the Dallas Zoo. *For more information contact Connie Lindley, PHR 2 & 3, (817) 264-4921, or e-mail connie.lindley@tdh.state.tx.us.*

Public Health Region 6/5 South

Epidemiology Investigation On August 22, the PHR 6/5 South Epidemiology Program received a request for assistance from Congressman Ron Paul's office regarding a suspected cluster of methicillin-resistant *Staphylococcus aureus* (MRSA) infection in the Wharton County jail. The regional epidemiologist, coordinated efforts between the TDH Division of Infection Control and Epidemiology, the TDH Lab, the Texas Department of Criminal Justice Preventative Medicine Department (TDCJ), and the Harris County Health Department to help to solve the problem. The epidemiologist provided the MRSA infection control guidelines from the Austin Area Infection Control Council and TDCJ, to the officials of the county jail. Recommendations from a similar previous outbreak in Harris County jails were also provided. *For more information contact Huai Lin, M.D., PhD, Epidemiology Program Manager, (713) 767-3232 or email huai.lin@tdh.state.tx.us.*

Mold Information Program Manager and Environmental Health Inspector worked with Federal Emergency Management Administration (FEMA) staff and other state agencies to inform the public about the need to clean up mold growth in homes and facilities that were flooded during Tropical Storm Allison. They made presentations in Houston to FEMA and

Division of Emergency Management (DEM) staffers, to insurance claims adjusters (at FEMA's request), and to long-term care providers (at the request of the Texas Department of Human Services). Working with input from local health departments in Houston and Harris County, they also wrote the document *Cleaning Up After A Flood: Mold In your Home*, which FEMA has translated into Spanish and Vietnamese, printed on TDH letterhead, and distributed through FEMA Disaster Recovery Centers, City Halls, schools, libraries, charity organizations, and grocery stores in the 30 counties designated as "disaster areas". The document will also be available on the TDH Indoor Air Quality website. Meanwhile, they and other Toxic Substances Control staff continue to work with flooded facilities such as schools and hospitals to ensure that safe and effective clean-up procedures are being followed. *For more information contact Jaye R. Stanley, MS, Program Manager, (713) 767-3258 or e-mail jaye.stanley@tdh.state.tx.us.*

Public Health Region 9/10

Community Forum on Health Disparities. TDH sponsored a Community Forum on Health Disparities. The event was co-sponsored by the Region and the Office of Minority Health. Recommendations on ways to deal with Health Disparities were discussed and will be presented to the Health Disparity Task Force. *For more information contact Bea Martinez, Public Health Promotions PHR 9/10, (915) 834-7746 or e-mail Beatrice.martinez@tdh.state.tx.us.*

Bioterrorism Response Committee. The Regional Bioterrorism Response Committee and area local Health Directors attended an Incident Command Training. The El Paso Emergency Response Office hosted the training. *For more information contact Dr. Evret Newman, Regional Veterinarian, (915) 834-7782 or e-mail Evret.Newman@tdh.state.tx.us.*

Medicaid Managed Care Community Forums. The Regional Office collaborated with the Health and Human Services Commission to host Medicaid Managed Care Community Forums in Midland, San Angelo and Alpine. These communities represent rural counties where Medicaid Managed Care has not been implemented. Ample community testimony was received and forwarded to the Health and Human Services Commission. *For more information contact Kaye Moor, CHIP and Medicaid Managed Care Regional Coordinator, (915) 834-7752 or e-mail Kaye.Moore@tdh.state.tx.us*

Sul Russ State University. Sul Russ State University dedicated the opening of the Pete P. Gallego Building Complex. Commemorating events included comments from University officials and member of the state legislative delegation, including Representative Pete P. Gallego. The Regional Director represented the Commissioner of Health during this event. *For more information contact Miguel A. Escobedo, Regional Director PHR 9/10, (915) 834-7675 or e-mail Miguel.Escobedo@tdh.state.tx.us.*

Public Health Region 11

Summer Medical Institute / Cameron County The Summer Medical Institute trains health professions students from around the nation to integrate compassion and excellence in their role as a caregiver. On June 27 and 28 Community Public Health and the Immunization Nurses trained 30 interns and 8 faculty members from Philadelphia on; state and federal

guidelines for consent, standing orders, emergency supplies, Vaccine Adverse Event Reporting System (VAERS), storage and handling of vaccine handling and technique.

The interns came to the Rio Grande Valley for a period of five weeks from June 24 to July 28. They worked in two colonias in Cameron County providing medical education, immunizations and referrals. Public Nurses worked with them at the sites to offer support and translation. The Family Practice Residency program and Valley Baptist Medical Center sponsored the project. They were also able to work on the Mexico border towns providing the same type of services. *For more information contact Mary Vincelli, Director of Nursing, Community Public Health, PHR-11 (956) 423-0130, or e-mail mary.vincelli@tdh.state.tx.us.*

Neural Tube Defects / Reynosa, Tamaulipas, Mexico. On July 6, by request of the Tamaulipas State Health Commissioner, Mr. Jorge Trevino, Birth Defects program manager PHR 11 attended the first Neural Tube Defects meeting in Reynosa, Tamaulipas, México. This meeting was organized by the Tamaulipas State Health authorities and it was intended to organize the Birth Defects program statewide with an initial phase concentrated in the Neural Tube Defects. The State epidemiologist announced that the State of Tamaulipas Health Authorities decided to implement active surveillance for anencephaly and spina bifida as well as to implement recurrence prevention efforts. All the local jurisdictions were represented as well as Health Authorities for the Mexican state of Nuevo Leon and from the Pan American Health Organization. Mr. Trevino provided a short presentation concerning the TDH Birth Defects Program and provided an update of the Neural Tube Defects regional prevention initiative. *For more information contact Jorge Trevino, Birth Defects Program Manager, PHR-11, (956) 423-0130, or e-mail Jorge.Trevino@tdh.state.tx.us.*

Texas Vaccine for Children (TVFC) called “Protecting Our Future / McAllen, Texas. On July 12, the Immunization Division sponsored a conference for Texas Vaccine For Children providers called “Protecting our Future”. A total of 183, physicians, nurses and support staff from Hidalgo, Willacy and Star counties attended the conference. *For more information contact Ivette Nunez, Immunization Program Manager, PHR-11, (956) 423-0130, or e-mail Ivette.Nunez@tdh.state.tx.us.*

Childhood Immunization Education Initiative Project / Hidalgo County On July 12, the Immunization Program Manager for region 11 attended a meeting with the Rio Grande Valley Health Research steering committee at the South Texas Center for Rural Public Health with Texas A&M University. The committee is working on a childhood immunization education initiative project in Hidalgo County. The purpose is to assess the immunization status of infants and young children living in colonias in Hidalgo County. *For more information contact Ivette Nunez, Immunization Program Manager, PHR-11, (956) 423-0130, or e-mail Ivette.Nunez@tdh.state.tx.us.*

Border Liaison Mechanism / Brownsville, Texas On July 31, the regional director and several program managers from region 11 met with the Mexican and United States Consuls and heads of invited local, state and federal agencies to report on communicable disease control. This is an important mechanism that allows us to meet the consuls and the new customs and immigrations directors on both sides with whom we need to work in all of our binational programs. *For more information contact Dr. Brian Smith, Regional Director, PHR-11, (956) 423-0130, or e-mail Brian.Smith@tdh.state.tx.us.*

Operation Lone Star 2001 / Hidalgo County. In July, the Harlingen Office of Border Health was involved with Operation Lone Star 2001 from July 15 (orientation), July 16 to July 26. A total of 6,332 persons were seen for dental, medical, immunizations & pharmaceutical services. The estimated cost of services provided at no charge to colonia residents was estimated at \$924,000. This included \$141,000 in free pharmaceuticals, approximately \$421,000 in medical care, and \$361,000 in dental treatment.

Military partners were: U.S. Navy, Texas Air National Guard, Marine Reservists and the Texas Army National Guard. Civilian partners were: TDH PHR 11, Texas A & M University-South Texas Center, Hidalgo County Health Department, Women Infant and Children, National Kidney Foundation, Texas State Technical College (TSTC), Dental Hygienists, Dentists Who Care, Local Independent School Districts, San Antonio Community College and the Valley Area for Independent Living.

This year brought the most high-level attention yet, with a tour on Very Important People (VIP) day from ranking navy and marine officers who funded the program, plus the Secretary of State Cuellar, Senator Truan, and both Brigadier Generals James and Mardy who head the Texas National Guard. Certificates were given by the Marines, the National Guard, and the Secretary of State, and Cuellar to TDH staff and all civilian workers.

In conjunction with the Texas State Board of Medical Examiners, a fellowship in public health was set up with 11.5 CME from TDH and the School of Public Health. This mechanism allowed the out-of state physicians to practice for the two weeks legally in Texas under the guidance of the regional director and the Texas National Guard physicians. Now that the fellowship is registered, any TDH region can use this means to work with volunteer physicians in indigent care in temporary, supervised situations. *For more information contact Dr. Brian Smith, Regional Director, PHR-11, (956) 423-0130, or e-mail Brian.Smith@tdh.state.tx.us.*